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(Requestor's Name)				
(Address)				
(Address)				
(City/Sta	ate/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(Ducinos Fath Mone)				
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
Special instructions to Finn	J. HORNE JUL - 3 20			

Office Use Only



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INHS18 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: SOFLO TRT LLC Name of Limited Li	ability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the f	following:		
Joseph Russonie III			
SO FLO TRT LLC Firm/Company			
4050 North Ocean DR #608 Address	<u> </u>		
LauderNale by the Sea FL 33305 City/State and Zip Code	3		
E-mail address: (to be used for future annual report notifi	cation)		
For further information concerning this matter, please call:			
Joseph Russoniello at (954) Name of Person) 658 832 (Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amount:			
\$25 Filing Fee	5 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l.	Name of the limited liability company: SOFLO TRT LLC	·
	1) YOSO N Ocean OR (b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		ivd endrie by the Sea #608
3.	3/16/2017 L Date of filing/registration in Florida 4.	7060060551 Document number
5. (_
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 21211	1825 July
	FL 33433	- · · · · · · · · · · · · · · · · · · ·
(1	Enter name of NEW Registered Agent and/or NEW Registered Office address:	 -
	havlendale by the Sea FL NEW Registered Office Address:	-
	33309	_
	. FL 33308	_
char ager was the a	e limited liability company is not organized under the laws of the State of Florige or changes are made, the Florida street address of the registered office and twill be identical. Or, in the case of a Florida limited liability company, it is were authorized by an affirmative vote of the members of the limited liability tricles of organization or the operating agreement of the limited liability continued a member or authorized representative of a member are proposed the appointment as registered agent and agree to act in this capacitions of all statutes relative to the proper and complete performance of my obligations of my position as registered agent as provided for in Chapter 603 erely reflect a change in the registered office address. I hereby confirm that fired in virting of this change.	d the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in appany. Finted or typed name of signee activ. I further agree to comply with the changes, and I am familiar with and accept in F.S. Or, if this document is being filed
Sign	Mildi Registered Agent	